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September 26, 2007

TO:

Each Supervisor

FROM:

Jonathan E. Fielding, M.D., M.P.H. Director and Health Officer

SUBJECT:

INTENT TO SEEK MEDI-CAL TARGETED CASE MANAGEMENT FUNDING

FOR THE NURSE-FAMILY PARTNERSHIP PROGRAM AND USE A SLIDING SCALE PAYMENT RATE FOR TARGETED CASE MANAGEMENT SERVICES

This memo is to inform you of our intent to seek reimbursement for services provided in the Department's Nurse-Family Partnership (NFP) Program through the Medi-Cal Targeted Case Management (TCM) program and use a sliding scale payment rate schedule to coincide with the State's requirements to obtain funding.

The NFP Program is an evidence-based program that uses public health nurses to provide case management, mentoring, support and training to high-risk pregnant girls/women. It has been empirically researched for over thirty years and has demonstrated consistently good outcomes for these at risk families. Public Health's NFP Program was established in 1997 and has been funded from several sources over the years, including Long Term Family Self Sufficiency and foundation funds. It is currently funded using net county dollars and matching funds through the Maternal, Child and Adolescent Health (MCAH) block grant. Recent revisions and clarifications made by the State on reimbursable services for the MCAH grant have markedly reduced these matching dollars, and it has been determined that a better match can be obtained by using TCM Medi-Cal funding which is more commonly used throughout the State for NFP services.

Department staff are working with the Chief Executive Office Service Integration Branch and the Auditor-Controller to implement the TCM funding reimbursement for FY 07-08.

In order for the Department to bill the federal government for services provided under the TCM Medi-Cal Program, the Federal regulations require a sliding scale of rates for payment for TCM services be established for non-Medi-Cal clients to ensure that the Federal Government is not billed for TCM services that are provided free to non-Medi-Cal clients. (W&I Code, Section 51492.2) This is not expected to significantly impact the target population of clients who are served within NFP, as the intake requirements are that the first-time pregnant girls/women must be "living in poverty" (i.e., within 200% of the federal poverty level) in order to be enrolled in this nurse home visiting program. Sliding [scale] fees will be established based on the Public Health Department's approved reimbursement rate (actual costs) established by the TCM Cost Report for each fiscal year.

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The NFP Program will implement a time-study for NFP staff during the month of September 2007, and the results of this time-study will guide the future year reimbursement rate for the programs' services.

If you have any questions or need additional information, please let me know.

JEF:js

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors
Auditor-Controller